Examiner Name

Approved for use through 07/31/2006. OMB 0651-0032 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number. Attorney Docket Number TJF 9011 - 119 **DECLARATION FOR UTILITY OR** First Named Inventor Thomas J. Fogarty **DESIGN** COMPLETE IF KNOWN PATENT APPLICATION (37 CFR 1.63) **Application Number** 10/776,570 Filing Date Declaration Declaration 11 February 2004 Submitted OR Submitted after Initial Art Unit With Initial 3731 Filing (surcharge (37 ČFR 1.16 (e)) Filing

	-	requi	ed)	Examiner	lame	Not Yet Av	railable				
I here	I hereby declare that:										
Each inventor's residence, mailing address, and citizenship are as stated below next to their name.											
I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:											
VASCULAR FIXATION DEVICE AND METHOD											
the sp	ecification of which		(Title of the	e Invention)							
	is attached hereto										
	OR										
V											
	(.00 011100 74	phoduori ite		or international			
Applic	Application Number 10/776,570 and was amended on (MM/DD/YYYY) (if applicable).										
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.											
	owledge the duty to										
contin and th	uation-in-part applica e national or PCT int	tions, material in ernational filing o	nformation which be late of the continual	ecame avail tion-in-part a	able betweer application.	the filing d	late of the	prior application			
I here	by claim foreign pric	rity benefits und	ler 35 U.S.C. 119(a	a)-(d) or (f),	, or 365(b) o	f any foreig	n applicati	on(s) for patent,			
countr	or's or plant breeder y other than the Unit	ed States of Am	erica, listed below a	and have als	so identified b	elow, by ch	ecking the	box, any foreign			
applica	ation for patent, inve	ntor's or plant br	eder's rights certificate	cate(s), or a	iny PCT inter	national app	olication ha	ving a filing date			
	before that of the application on which priority is claimed. Prior Foreign Application Foreign Filing Date Priority Certified Copy Attached?										
	Number(s)	Country	(MM/DD/Y	YYY)	Not Cla	aimed	Yes	No No			
					<u> </u>	_	! <u> </u>				
					L						
Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.											

[Page 1 of 2]

This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Office, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

PTO/SB/01 (08-03)

Approved for use through 07/31/2003. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION — Utility or Design Patent Application

**										
Direct all correspondence to:	Custome	er Number:	4	10518		OR		Corres	pondence address below	
Name										
Address										
City				State)				ZIP	
Country		Telephone	•			Fax				
•										
I hereby declare that all statem	ents made her	ein of my o	wn know	ledge	are tri	e and t	hat all	stateme	ents made on information	
and belief are believed to be	true; and fun	ther that th	hese stat	ement	s were	e made	with	the kno	wledge that willful false	
statements and the like so made false statements may jeopardize	de are punishat	ble by fine	or impriso	nmen	t, or b	oth, und	ler 18	U.S.C.	1001 and that such willful	
laise statements may jeopardiz	e trie validity of	the applica	ation or ar	iy pate	ent issu	lea mer	eon.			
NAME OF SOLE OR FIRST IN	VENTOR:		Ap	etition	has be	en filed	for thi	s unsigr	ned inventor	
Given Name (first and middle [i	f any])			·				or Surna		
Thomas J.					F	ogarty				
Inventor's Date										
Signature										
Residence: City	State	 		Cour	ntry			Citize	nship	
Portola Valley	CA		•	USA			USA	JSA		
Mailing Address	<u> </u>									
3270 Alpine										
City	State				ZIP				Country	
Portola Valley	CA			94028					USA	
				Т						
NAME OF SECOND INVENTO					Αp	etition h	as bee	n filed f	or this unsigned inventor	
Given Name (first and middle)	if any])				F	amily N	ame or	Surnar	ne	
D. Bruce					Mo	desitt				
Inventor's Signature D. 13	Mo	doutt	<u>-</u>						Date 7/21/04	
Residence: City	State			Cour	ntry			Citize	nship	
San Carlos CA			USA			USA				
Mailing Address 120 Wingate Avenue					·					
City	State				ZIP			Count	ry	
San Carlos CA					94070			USA		
Additional inventors or a legal re	presentative are bei	ng named on	the 1 s	upplem	ental she	et(s) PT()/SB/02A	or 02LR	attached hereto.	

PTO/SB/01 (08-03)
Approved for use through 07/31/2003. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION — Utility or Design Patent Application

			· · · · · · · · · · · · · · · · · · ·						
Direct all correspondence to: Customer Number:			4	40518				Corres	pondence address below
Name									
Address									
City				State					ZIP
Country		Telephone	8		Fax				
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.									
NAME OF SOLE OR FIRST IN	VENTOR:		ПАр	etition	has be	en filed	for thi	s unsiar	ned inventor
Given Name (first and middle [i	f any])	, L						r Surna	
Thomas J.					F	ogarty			
Inventor's Signature Industry	1/1 //								
Residence: City Portola Valley	State CA			Coun	Country Citizens JSA USA			nship	
Mailing Address 3270 Alpine		·							
City	State				ZIP				Country
Portola Valley	CA				94028				USA
NAME OF SECOND INVENTO	R:				A pe	etition l	nas bee	en filed f	for this unsigned inventor
Given Name (first and middle [if any])			-	Fa	mily N	ame o	Surnar	me
D. Bruce					Мо	desitt			
Inventor's Signature									Date
Residence: City State				Country			Citize	nship	
			USA USA						
Mailing Address 120 Wingate Avenue				_				,	
City	State				ZIP			Count	try
San Carlos CA			4	94070			USA		
Additional inventors or a legal re	presentative are be	ing named on	the1	supplem	ental she	et(s) PT	O/SB/02/	or 02LR	attached hereto.

PTO/SB/02A (08-03) Approved for use through 08/31/2003. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Country

e Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION

City

ADDITIONAL INVENTOR(S) Supplemental Sheet

Name of Additional Joint Inventor, if any:		☐ A pet	ition l	has been filed for this	unsigned inv	ventor			
Given Name (first and middle (if any)	Family Name or Surname								
Neil	Holmgren								
Inventor's Signature 24 Ph					Date 6	/14/04			
Chicago Residence: City	IL State	Ĭ	USA Cou	ntry	USA Citizenship				
6211 N. Winthrop Avenue, #605 Mailing Address									
Mailing Address									
Chicago City	CA State			60660 Zip	USA Country				
Name of Additional Joint Inventor, if any:		☐ A peti	ition l	nas been filed for this	unsigned inv	ventor			
Given Name (first and middle (if any)		Family Name or Surname							
Jamie Juliana		van Hoften							
Inventor's Signature		Date							
Lafayette Residence: City	CA State			USA Country		USA Citizenship			
1014 Regio Court Mailing Address									
Mailing Address		· -							
Lafayette City	CA State			94549 Zip	USA Country				
Name of Additional Joint Inventor, if any:	1 5,5,5	☐ A peti	ition I	nas been filed for this		ventor			
Given Name (first and middle (if any)		Family Name or Surname							
Michael J.		Drews				·			
Inventor's Signature Muhael V. Ben		Date	61	114/04					
Sacramento Residence: City	CA State			USA Country		USA Citizenship			
4524 U Street Mailing Address									
Mailing Address									
Sacramento	CA			05817	LISA				

Zip This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

State

PTO/SB/02A (08-03)
Approved for use through 08/31/2003. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION

Mailing Address Sacramento

City

ADDITIONAL INVENTOR(S) Supplemental Sheet

·								
Name of Additional Joint Inventor, if any:		A	petition I	has been filed fo	or this unsigr	ned inventor		
Given Name (first and middle (if any)		Family N	lame or s	Surname				
Neil		Holmgren						
Inventor's Signature 24 Mh					Date	6/14/04		
Chicago Residence: City	IL State		USA Cour	ntry	USA Citize	enship		
6211 N. Winthrop Avenue, #605 Mailing Address								
Mailing Address	<u></u>							
Chicago City	CA State	e		60660 Zip	USA Col	untry		
Name of Additional Joint Inventor, if any:		□ A ₁	oetition h	nas been filed for	r this unsign	ed inventor		
Given Name (first and middle (if any)				Family Nan	ne or Surnan	ne		
Jamie Juliana		van Hoften						
Inventor's Jumi van HA		Date 2	اللا	104				
Lafayette Residence: City	CA State	•		JSA Country		USA Citizenship		
1014 Regio Court Mailing Address								
Mailing Address								
afayette City	CA State)		94549 Zip	USA Cou	untry		
Name of Additional Joint Inventor, if any:		□ Ap	etition ha	as been filed for	r this unsigne	ed inventor		
Given Name (first and middle (if any)		Family Name or Surname						
Michael J.		Drews						
Inventor's Signature Myhael V stern		Date	61.	14/04				
Sacramento Residence: City	CA State	<u>; </u>		ISA Country		USA Citizenship		
IS24 U Street Mailing Address				•				

This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

95817

Zip

USA

Country

CA

State

If you need assistance in completing the form, call 1-800-PTO-9199 (1-800-786-9199) and select option 2.

